



PARKING SERVICES DEPARTMENT
SAVANNAH, GA 31401
(912)651-6470

STUDENT RESIDENTIAL PARKING DECAL APPLICATION

Student Decal _____

Temp Decal _____

Student Name _____

Address _____

Phone(Cell) _____ Alternate Phone _____

VEHICLE MAKE _____ YEAR _____

TAG NUMBER _____ EXPIRATION _____

PROOF OF RESIDENCE: LEASE _____

EXPIRATION OF LEASE _____ TYPE OF UTILITY _____

LANDLORD NAME _____ PHONE _____

The applicant swears and confirms the information above is correct and all requirements are met. The applicant further understands that any falsification or misrepresentation will be considered grounds for permanent revocation of the Student Parking Decal.

Applicant also understands that the decal issued is a privilege granted to park at metered spaces within one block radius of the residence. The decal will become void when applicant relocates.

It is the responsibility of the applicant to renew the decal prior to the expiration date. Any citations issued after the expiration date **WILL NOT** be dismissed.

Applicant's Signature _____ Initial-Rules/Regulations _____

Issued By _____ Date _____

OFFICE USE ONLY: MISC NOTES